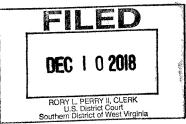
UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF WEST VIRGINIA



LEDN Wilson Jr.	3546945
(Enter above the full name of the plain or plaintiffs in this action).	ntiff (Inmate Reg. # of each Plaintiff)
VERSUS	CIVIL ACTION NO. 2:18-cv-1502 (Number to be assigned by Court)
Co Turner/Sout Central Regional Ja	
(Enter above the full name of the defendents in this action)	ndant
9	COMPLAINT
I. Previous Lawsuits	
· · · · · · · · · · · · · · · · · · ·	iwsuits in state or federal court dealing with the same tion or otherwise relating to your imprisonment?
Yes	No

B.

If your answer to A is yes, describe each lawsuit in the space below. (If there

is more than one lawsuit, describe the additional lawsuits on another piece of

paper,	paper, using the same outline).		
1.	Parties to this previous lawsuit: Plaintiffs: Defendants: MA		
2.	Court (if federal court, name the district; if state court, name the county);		
3. 4. 5.	Docket Number: Name of judge to whom case was assigned: Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?		
6.7.	Approximate date of filing lawsuit: 11-30-2018 Approximate date of disposition:		

н.	Place	of Present Confinement: South Central Begional Jail	
	A.	Is there a prisoner grievance procedure in this institution?	
		Yes No	
	В.	Did you present the facts relating to your complaint in the state prisone grievance procedure?	
	*	Yes No	
	C.	If you answer is YES:	
		1. What steps did you take?	
		2. What was the result?	
D. If your answer is NO, explain why not: <u>Because</u>		If your answer is NO, explain why not: Because I was	
	afraid of retaliation.		
III.	Parti	es	
	and p	em A below, place your name and inmate registration number in the first blank lace your present address in the second blank. Do the same for additional iffs, if any.)	
	A.	Name of Plaintiff: Leon Wilson Jr. 3546945	
		Address: 1001 Certire Way Charleston, WV 25309	
	В.	Additional Plaintiff(s) and Address(es):	

(In item C below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third

		Use item D for the names, positions, and places of employment of any onal defendants.)	
C. Defendant: CO Turner			
		is employed as: South Central Regional Jail	
		at As a correctional officer.	
	D.	Additional defendants:	
	•		
IV.	State	ment of Claim	
	is invo	here as briefly as possible the <u>facts</u> of your case. Describe how each defendant olved. Include also the names of other persons involved, dates and places. Do we any legal arguments or cite any cases or statutes. If you intend to allege a er of related claims, set forth each claim in a separate paragraph. (Use as much as you need. Attach extra sheets if necessary.)	
0	disconnect:	-23-2018 at the time of 11:30 - 12:00 m	
da	Cino	lunch I was assalted by Co Turner	
	Frok	it of all of the immates and his Convorter	
ac	<u>8</u>	OWN and Co Carter.	
***************************************	······································		
	······································		

IV.

IV.	Statement of Claim (continued):
Ā	(A
V-10-1	

v.	Relief
	State briefly exactly what you want the court to do for you. Make no legal arguments Cite no cases or statutes.
do éc.	I would want for Co Turner to be released
<u>C</u>	om his duties here as a correctional officer.
	I would want to be compensated for
	ne assault.

(

V. Relief (continued)):		f (continued)):
	NIA	
		
-		
VII.	Coun	sel
	A.	If someone other than a lawyer is assisting you in preparing this case, state the person's name:
		NA
	В.	Have you made any effort to contact a private lawyer to determine if he or sho would represent you in this civil action?
		Yes No
		If so, state the name(s) and address(es) of each lawyer contacted:
·		
		If not, state your reasons: Incarcerated and don't
		have proper resources.
	C.	Have you previously had a lawyer representing you in a civil action in this court?
		Yes No

If so, state the law	yer's name and address:
RILA	
Signed this <u>29</u> d	lay of November, 2018.
	Leon Wilson Jr.
	Signature of Plaintiff or Plaintiffs
I declare under penalty of perjur Executed on 11-30-20	y that the foregoing is true and correct.
OFFICIAL SEAL NOTARY PUBLIC STATE OF WEST VIRGINIA BRITTANY N. BREEDEN SOUTH CENTRAL REGIONAL JAIL 1001 CENTERE WAY CHARLESTON, WV 25309 My Commission Expires June 08, 2023	Saon Wilson W.
J. Gre	Signature of Movant/Plaintiff
G:	
Signature of Attorney (if any)	